0	

r the	Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unle	ss it displays a valid OMB control
5	PATENT APPLICATION FEE DETERMINATION RECORD	Application or Docket Number
	Substitute for Form PTO-875	09349571

-	Substitute for Form PTO-875								09	09349571		
-	CLAIMS AS FILED – PART I (Column 1) (Column 2)							SMALL	ENTITY	OR	OTHE SMALI	R THAN
	FOR	NUM	BER FILEC	NUN	MBER EXTRA		RATE	FEE		RATE	FE	
	BASIC FEE (37 CFR 1.16(a))								\$	OR		\$
	TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 =						7	x \$ =		OR	x \$ =	+==
IN	INDEPENDENT CLAIMS					1			1		<del> </del>	
_	(37 CFR 1.16(b)) minus 3 = 1						$\dashv$	X \$=		OR	X \$=	<del> </del>
MU	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								<u> </u>	OR	+ \$=	<del> </del>
• If	* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	L	OR	TOTAL	
		CLAIM	S AS AM	IENDEC	) – PART II							
			olumn 1)	•••	(Column 2)	(Column 3)	_	SMALL I	ENTITY	OR		R THAN ENTITY
NTA		RE	CLAIMS MAINING AFTER ENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADI TION FE
) XX	Total (37 CFR 1.16(c))			Minus	••	=	1	x \$=		OR	x \$ =	
AMENDMENT	Independent (37 CFR 1.16(b))	1.		Minus	•••	=	1	× \$ =		OR	× \$ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					1			OR			
	l		-				J	TOTAL			TOTAL	
		,						ADD'L FEE		OR	ADD'L FEE	L
_	Γ		lumn 1) LAIMS	Γ	(Column 2) HIGHEST	(Column 3)	7	<del></del>		1	<b></b>	<del></del>
NT B	11.18.04	REN	MAINING FTER NDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADE TION FEI
DMENT	Total (37 CFR 1 16(c))		13	Minus	20	=	1	x \$ =		OR	X \$ =	
	Independent (37 CFR 1 16(b))		5	Minus	5	=	1	x \$ =		OR	x \$ =	
AMEN	FIRST PRESEN	ITATION C	OF MULTIPLE	E DEPENDE	NT CLAIM (37 C	FR 1.16(d))	1	+5 =		OR		
							J	TOTAL ADD'L FEE		OR	+ \$ = TOTAL ADD'L FEE	
		(Colu	رnn 1)		(Column 2)	(Column 3)						
AMENDMENT C		REM	AIMS AINING TER IDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADC TION. FEE
	Total (37 CFR 1 16(c))		1	Minus	••	2		x \$=		OR	x \$ =	
EN	Independent (37 CFR 1 16(b))	•		Minus	•••	R		x \$ =		OR	x \$ =	
A	FIRST PRESENT	TATION O	F MULTIPLE	DEPENDE	NT CLAIM (37 CI	FR 1 16(d))		+ 5 =		OR	+ 5 =	

TOTAL

ADD't FEE

TOTAL

ADD'L FEE

OR

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3

<sup>&</sup>quot;If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"

<sup>\*\*\*</sup> If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.